

Status >>>

New Form

<<< Status

Traveler Information (click here to open/close)

**EPA**Approval to Accept Travel
Under Ethics Reform Act of 1989**Event Location**

South Georgia

Traveler's Role ⓘ

Official Duty



Outside Activity

Travel Starts

07/12/2018

Travel Ends

07/12/2018

Event Sponsor(s)

Georgia Department of Agric

Purpose of Event ⓘ

Tour of south Georgia farms to discuss envir

DEO or designee

Mary Walker

Employee Name

Trey Glenn

Spousal expenses included?

Yes



No

Title

Regional Administrator

Organization

U.S. EPA - Region 4

Phone Number

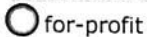
404-562-8357

Who is the non-federal person(s) or entity(s) paying travel expenses? ⓘ**Name of Organization:**

Gary Black, Commissioner, Georgia Department of Agriculture

Address:

19 MLK Jr. Dr SW, Atlanta, GA

What kind of entity is this? ⓘ

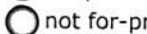
for-profit



state/local government



College/University



not for-profit



foreign government



Other (explain below)

Describe the entity (source) paying travel expenses. If the source of the travel expenses is an organization, describe the membership of the organization. For example, the "Center for Sound Science" may be largely made up of companies which produce chemicals regulated by your program or interest groups who take a position on our policies or regulations. (You can attach files below.)

State government agency

Is this source a party to a matter that is pending before you for decision, such as a contract or assistance agreement matter, permit, license, etc.? If "Yes", then acceptance of travel expenses cannot be approved



Yes



No

Is this source paying the travel through an EPA contract, Federal assistance agreement OR FEDERAL GRANT (including a recipient's matching share)? If "Yes", then acceptance of travel expenses cannot be approved ⓘ



Yes



No

Is this source otherwise affected by EPA matters in which you participate?



Yes



No

If "Yes," describe the matter and attach explanation (below). ⓘ

Itemization of benefits ⓘ**Amount & METHOD of payment** ⓘ**IN KIND****IN CASH**

ticket, meals etc., est. the \$ must be a check etc. made out to EPA

Common carrier transportation

\$ 867.00

\$ 0.00

Meals

\$ 0.00

\$ 0.00

Lodging

\$ 0.00

\$ 0.00

Local transportation

\$ 0.00

\$ 0.00

Waiver of fees ⓘ

\$ 0.00

\$ 0.00

Other (specify)

\$ 0.00

\$ 0.00

Sub Total \$ 867.00

Sub Total \$ 0.00

TOTAL →→→→→ \$ 867.00